macule and patch
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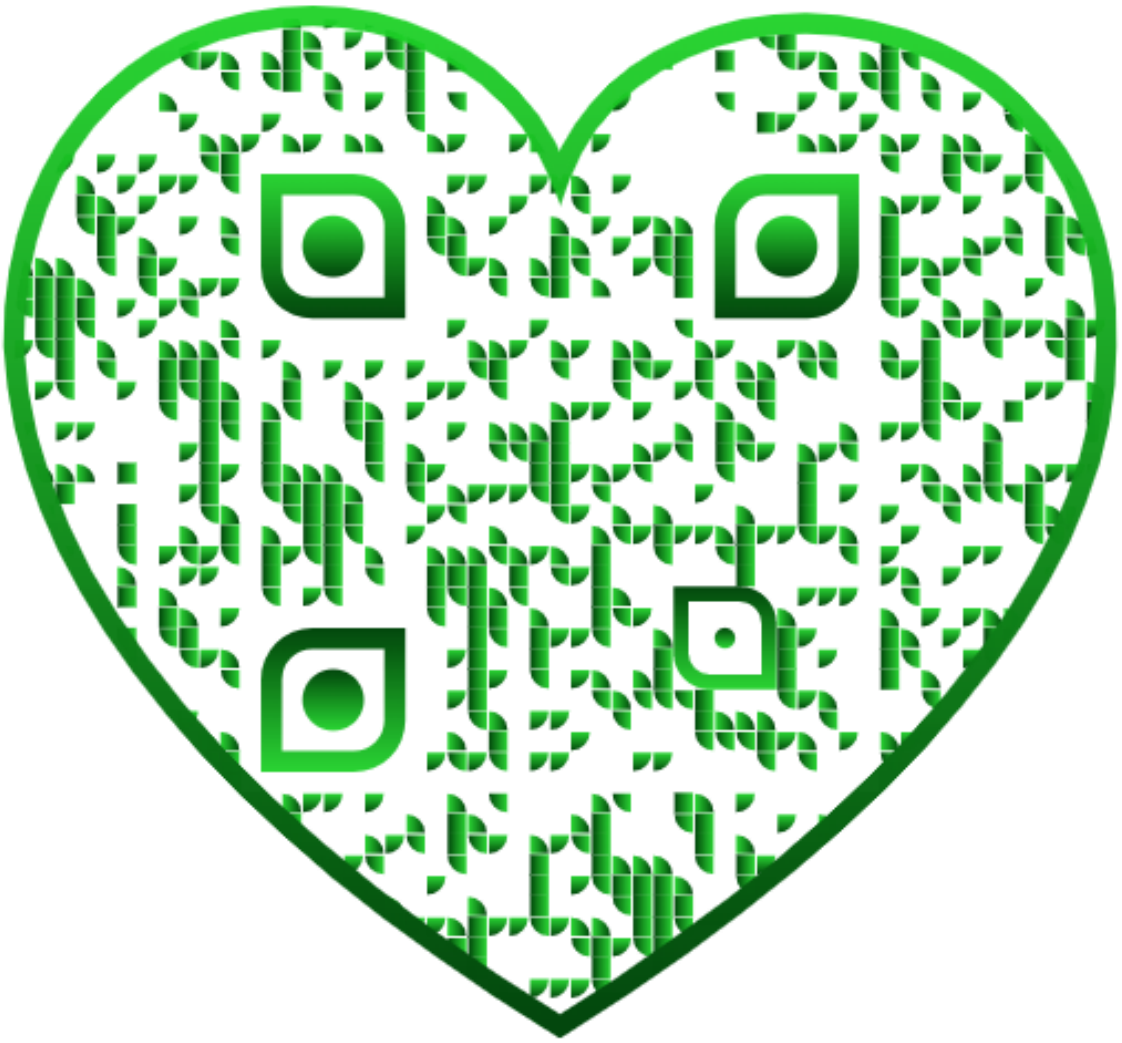

papule

plaque
15/06/2005

nodules
01/02/2002

pustules
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bulls

wheal

crust
erosion
ulcer

ulcer
7 8 2005

lichenification

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impetigo

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ecthyma
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37
تحرير

It is characterized by the formation of adherent crusts beneath which ulceration occurs.

In Europe, most cases occur in children, but in tropics it may occur at any age.

Ecthyma

Clinically small bullae or pustules on an erythematous base is soon surmounted by a hard crust of dried exudate which increases in size by peripheral rim accretion.

The crust is removed with difficulty to reveal a purulent irregular ulcer.

Healing occurs after few weeks with scarring.

Ecthyma

The lesions are usually few in number and the buttocks, thighs, and legs are most commonly affected.

Treatment

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تشغيل
أدوات

folliculitis
backhart impetigo
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تحرير

- It is an infection of the follicular orifices with *Staphylococcus aureus*. It appears as fragile yellow pustules and affects mainly the extremities and scalp.

Folliculitis
Sycosis vulgaris

- It is a perifollicular, chronic, pustular staphylococcal infection of the beard region, characterized by inflammatory papules and pustules, and a tendency to recurrence.

Folliculitis
pseudofolliculitis

this condition is not primarily infective and should be differentiated from sycosis vulgaris. Inflammation results from penetration into the skin of sharp tips of shaved hairs. If shaven too long, or if it escapes shaving for a few days, the hair may curve backwards to penetrate the adjacent skin. The

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مشاركة
تشغيل
أدوات

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تحرير

results from penetration into the skin of sharp tips of shaved hairs. If shaven too long, or if it escapes shaving for a few days, the hair may curve backwards to penetrate the adjacent skin. The patient usually complains of minor discomfort and cosmetic embarrassment from papules and pustules on shaven skin.

Furunculosis (Boils)

A furuncle, or boil, is an acute, round, tender, circumscribed, follicular staphylococcal abscess that generally ends in central suppuration.

Carbuncle

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أدوات

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حفظ
مشاركة

- **Predisposing factors**

Impaired integrity of the skin surface by irritation, friction, hyperhidrosis, dermatitis or shaving.

Presence of a contagion, or autoinoculation from a carrier focus, usually in the nose or groin.

Systemic disorders as malnutrition, blood diseases, diabetes, and immunosuppressive conditions as AIDS.

Furunculosis (Boils)

The lesions begin in hair follicles, and often continue for a prolonged period by autoinoculation.

Some lesions disappear before rupture, but most undergo central necrosis and rupture through the skin, discharging purulent, necrotic debris.

The sites commonly involved are the face and neck, the arms, wrists and fingers, the buttocks and the anogenital region.

Furunculosis (Boil

Treatment

Topical and systemic antibiotics as for impetigo.

Incision and drainage of some cases.

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cellulitis and
erysipelas

interdigital fungal or bacterial infection.

Of the unusual complications are gangrene, metastatic abscesses and grave sepsis.

Treatment

Systemic penicillin and cephalosporins are usually effective.

What is your diagnc

- A. Erysipelas
- B. Cellullitis

Erythrasma

- Erythrasma is a mild, chronic, localized superficial infection of the skin caused by the diphtheroid *Corynebacterium minutissimum*

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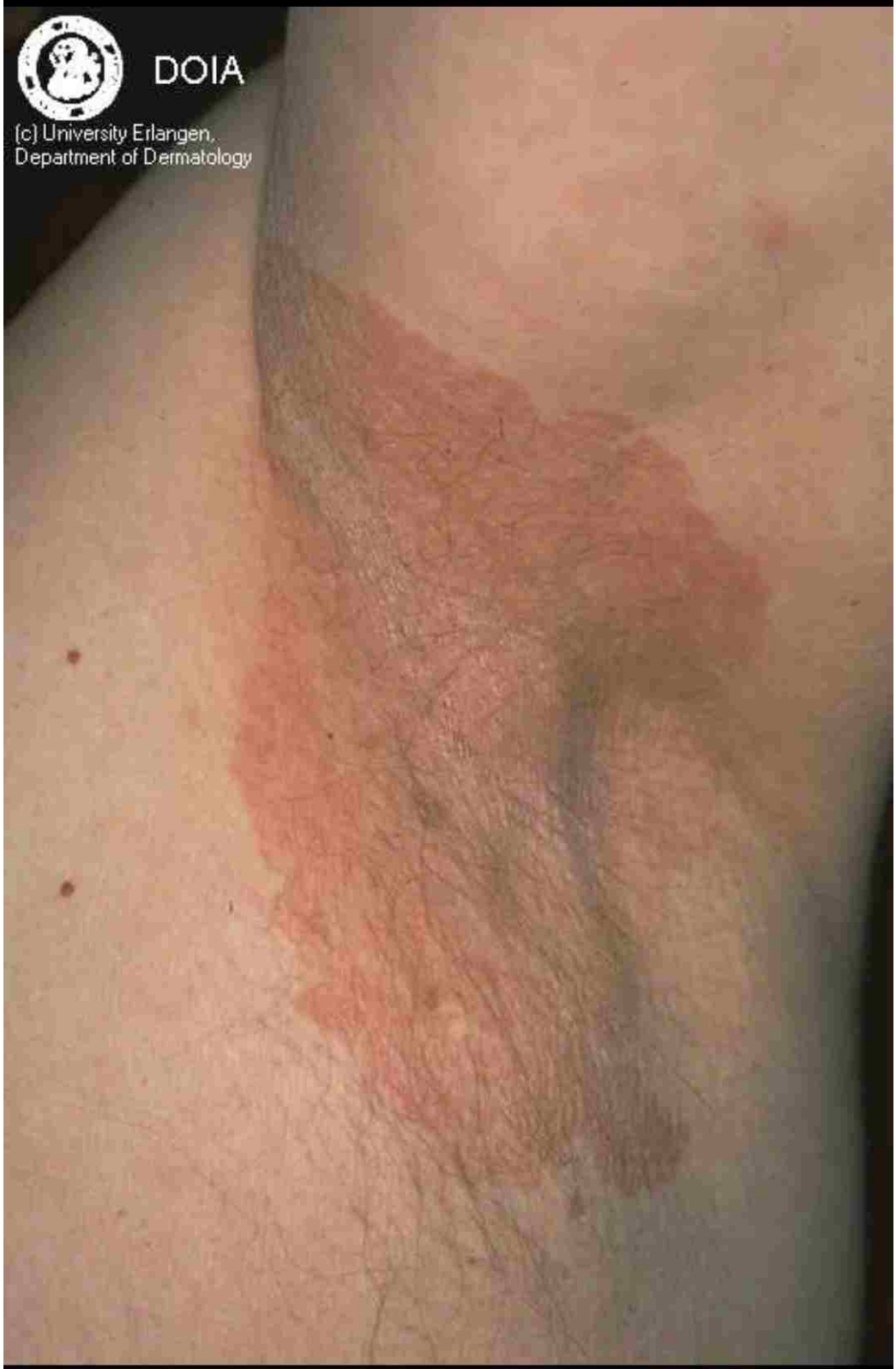
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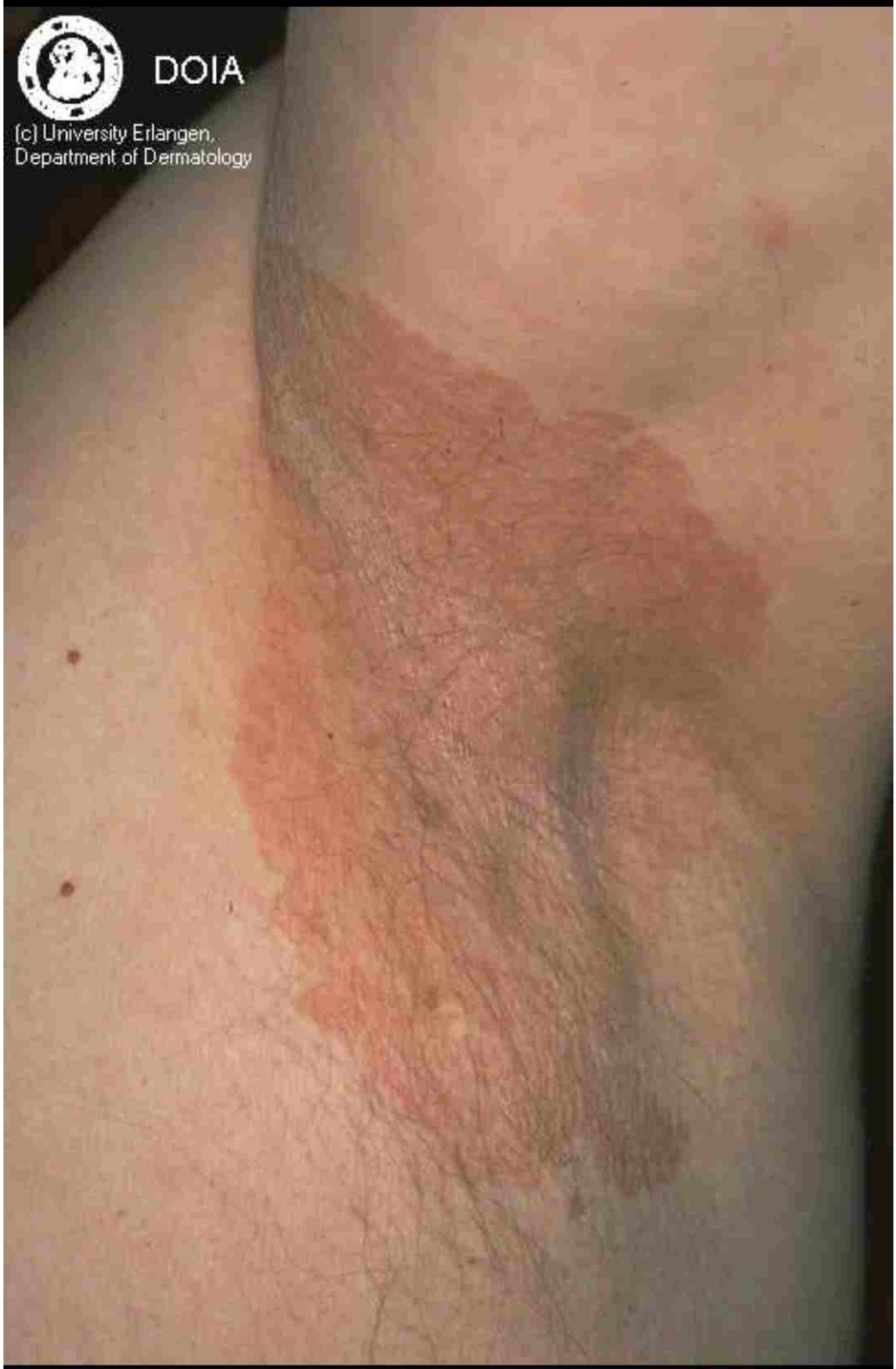
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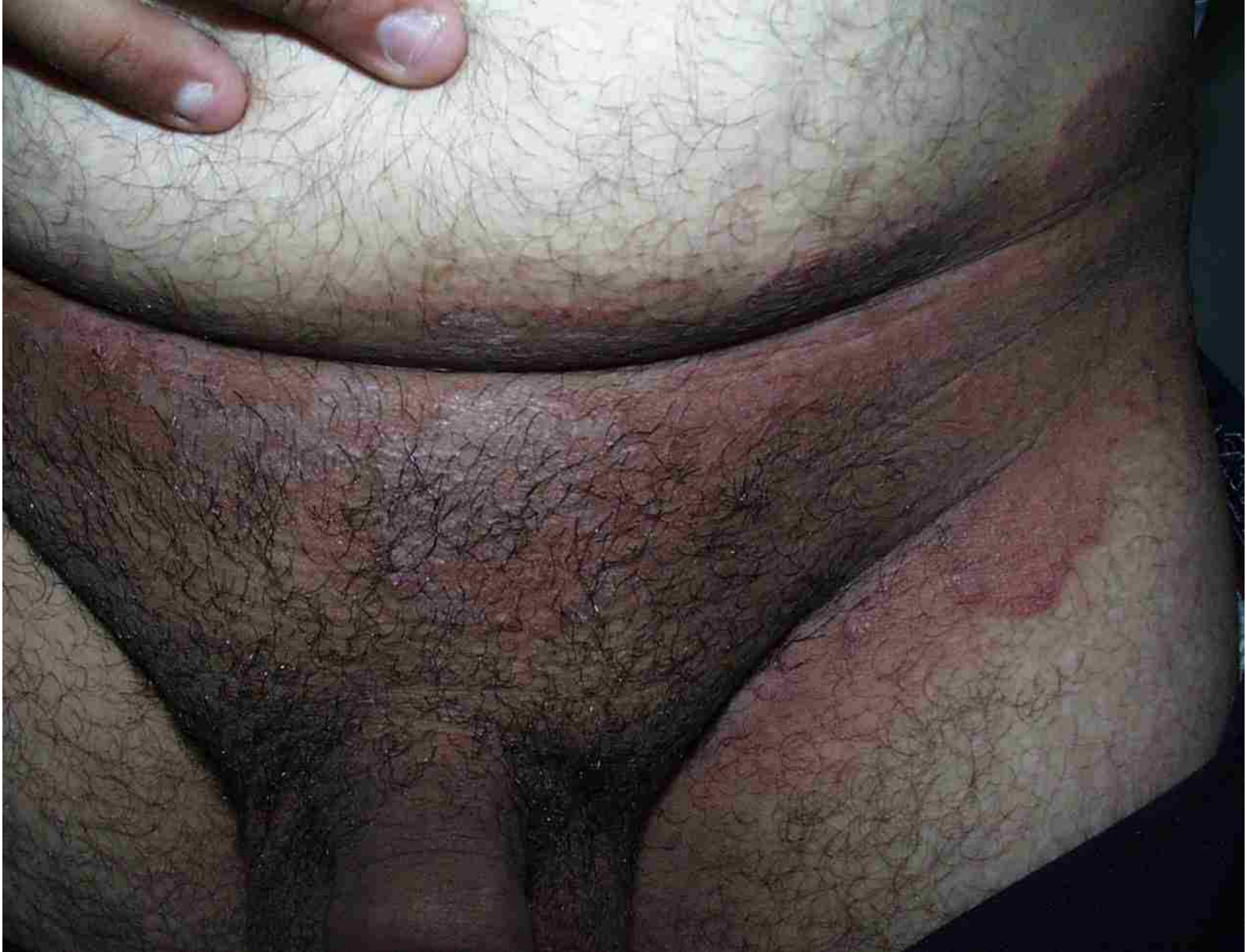
tinea capitis

kerion

tinea Barbie

tinea circinate

tinea cruris



onychomycosis
(tinea ungum)

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تحرير

Clinical picture

The patient usually complains only of a patchy and varying change of skin color, but mild irritation is sometimes noticed. The primary lesion is a sharply demarcated macule covered by fine branny scales. The lesions may coalesce to form large confluent areas, and scattered oval patches. The patches are yellowish or brownish in white skin and hypopigmented in dark skin.

The sites of predilection are the chest, the upper arms, the abdomen, back, neck, and intertriginous areas. Relapse of the disease is very common.

Pityriasis versicolor (T.V)

Treatment

- Topical antifungals daily for 2-3 weeks.
- Ketoconazole 2% shampoo.
- Selenium sulphide 2-5% shampoo.
- Sodium hyposulphite 20% solution.

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candidiasis

herpis simplex

chicken pox

herpis zoster

herpetic ophthalmiticus

anogenital wart

mulluscum contagiosum

lupus vulgaris

tuberculosus leprosy

lepromatous leprosy

borderline leprosy

scabies
scabies
nodules

pediculosis capitis

acne vulgaris
SFS

acne vulgaris
SFS

SFS

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10 11 2005

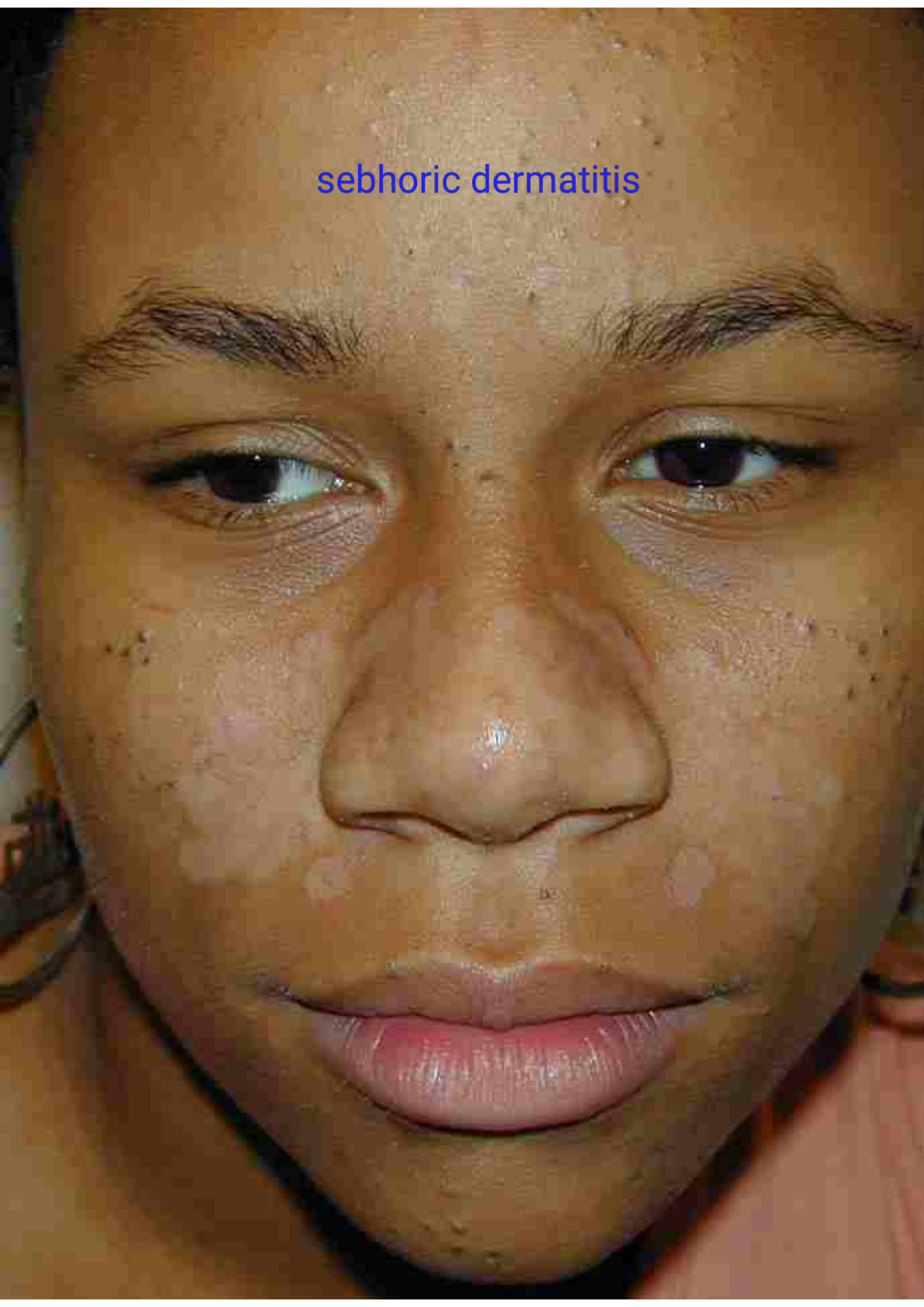
SFS

contact
dermatitis

sebhoric dermatitis
sebhoric dermatitis

Acute dermatitis

infective
dermatitis


sebhoric dermatitis

pityriasis alba

papular urticaria

papular urticaria

erythema multiform

SJSyndrom

fixed drug
eruption
fixed drug
eruption

psoriasis

lichen planus

lichen planus

lichen planus

lichen planus

lichen planus

pityriasis rosea

pityriasis rosea

milaria (sweat

milaria (sweat

alopecia areata
alopecia areata

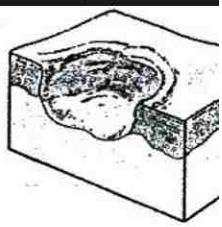
vitiligo

vitiligo

٣:٣٠ م

clear, coated, with granulation tiss

- **edge** – undermined, collowed, flat adjacent, with epitelization…



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Cohen: Memmler's The Human Body in Health and Disease

Lesions can be: